

Please type a plus sign (+) inside this box → ☐

PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration Submitted With Initial Filing OR ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)

|                          |                             |
|--------------------------|-----------------------------|
| Attorney Docket Number   | 5277I1 US                   |
| First Named Inventor     | Stephen J. Gunstream et al. |
| <b>COMPLETE IF KNOWN</b> |                             |
| Application Number       | 10/757,903                  |
| Filing Date              | January 14, 2004            |
| Art Unit                 | 1743                        |
| Examiner Name            | To be assigned              |

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**REDUCING EFFECTS OF SPECTRAL NONUNIFORMITY**

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ Was filed on (MM/DD/YYYY) 01/14/2004 as United States Application Number or PCT International

Application Number 10/757,903 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed     | Certified Copy Attached?     |                             |
|-------------------------------------|---------|----------------------------------|--------------------------|------------------------------|-----------------------------|
|                                     |         |                                  | <input type="checkbox"/> | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
|                                     |         |                                  | <input type="checkbox"/> | <input type="checkbox"/>     | <input type="checkbox"/>    |
|                                     |         |                                  | <input type="checkbox"/> | <input type="checkbox"/>     | <input type="checkbox"/>    |
|                                     |         |                                  | <input type="checkbox"/> | <input type="checkbox"/>     | <input type="checkbox"/>    |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

Please type a plus sign (+) inside this box → +

PTO/SB/01 (10-00)  
Approved for use through 10/31/2002. OMB 0651-0032  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## DECLARATION - Utility or Design Patent Application

Direct all correspondence to:



Practioners at Customer Number  
**OR**

22896



22896

PATENT TRADEMARK OFFICE



Correspondence address below:



Firm or  
Individual Name

Address

City

State

Zip

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued hereon.

**NAME OF SOLE OR FIRST INVENTOR:**



A petition has been filed for this unsigned inventor.

Given Name  
(first and middle [if any])

Stephen J.

Family Name  
Or Surname

Gunstream

Inventor's  
Signature

Date 07/06/04

Residence: City

San Francisco

State

CA

Country

US

Citizenship

US

Mailing Address

1504 Pershing Drive, Apartment B

City

San Francisco

State

CA

Zip

94129

Country

US

**NAME OF SECOND INVENTOR:**



A petition has been filed for this unsigned inventor.

Given Name  
(first and middle [if any])

Mark F.

Family Name  
Or Surname

Oldham

Inventor's  
Signature

Date 7/23/04

Residence: City

Los Gatos

State

CA

Country

US

Citizenship

US

Mailing Address

16500 Soda Springs Road

City

Los Gatos

State

CA

Zip

95033

Country

US



Additional inventors are being named on the one (1) supplemental Additional Inventor(s) sheet(s) PTO/SB02A attached hereto.

[Page 2 of 3]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450 DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. 68381\_1

Please type a plus sign (+) inside this box → ☐

PTO/SB/02A (10-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

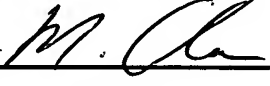
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## DECLARATION

## ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 1 of X2.

|  |          |  |                |
|--|----------|--|----------------|
| Name of Additional Joint Inventor, if any:   |          | <input type="checkbox"/> A petition has been filed for this unsigned inventor. |                |
| Given Name (first and middle [if any]) Michael R.  |          | Family Name Or Surname Gambini   |                |
| Inventor's Signature  |          | Date 7/1/04  |                |
| Residence: City Bolton   | State MA | Country US   | Citizenship US |
| Mailing Address 24 Annie Moore Road  |          |  |                |
| City Bolton  | State MA | Zip <del>01776</del> 01740   | Country US     |
| Name of Additional Joint Inventor, if any:   |          | <input type="checkbox"/> A petition has been filed for this unsigned inventor. |                |
| Given Name (first and middle [if any]) John C.   |          | Family Name Or Surname Voyta   |                |
| Inventor's Signature   |          | Date   |                |
| Residence: City Sudbury  | State MA | Country US   | Citizenship US |
| Mailing Address 99 Maynard Farm Road   |          |  |                |
| City Sudbury   | State MA | Zip 01776  | Country US     |
| Name of Additional Joint Inventor, if any:   |          | <input type="checkbox"/> A petition has been filed for this unsigned inventor. |                |
| Given Name (first and middle [if any])   |          | Family Name Or Surname   |                |
| Inventor's Signature   |          | Date   |                |
| Residence: City  | State    | Country  | Citizenship    |
| Mailing Address  |          |  |                |
| City   | State    | Zip  | Country        |

MRK 7/1/04

[Page 3 of 3]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

68381\_1

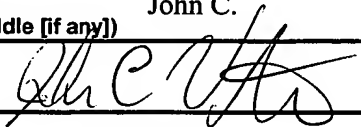
Please type a plus sign (+) inside this box → ☐

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**DECLARATION****ADDITIONAL INVENTOR(S)****Supplemental Sheet**Page 22 of 22.

|   |                 |  |                       |
|---|-----------------|--|-----------------------|
| <b>Name of Additional Joint Inventor, if any:</b>   |                 | <input type="checkbox"/> A petition has been filed for this unsigned inventor. |                       |
| <b>Given Name</b><br>(first and middle [if any]) Michael R.   |                 | <b>Family Name</b><br>Or Surname Gambini                                       |                       |
| <b>Inventor's Signature</b>   |                 | <b>Date</b>  |                       |
| <b>Residence: City</b> Bolton   | <b>State</b> MA | <b>Country</b> US  | <b>Citizenship</b> US |
| <b>Mailing Address</b> 24 Annie Moore Road  |                 |  |                       |
| <b>City</b> Bolton  | <b>State</b> MA | <b>Zip</b> 01776   | <b>Country</b> US     |
| <b>Name of Additional Joint Inventor, if any:</b>   |                 | <input type="checkbox"/> A petition has been filed for this unsigned inventor. |                       |
| <b>Given Name</b><br>(first and middle [if any]) John C.  |                 | <b>Family Name</b><br>Or Surname Voyta   |                       |
| <b>Inventor's Signature</b>  |                 | <b>Date</b> 4/18/04  |                       |
| <b>Residence: City</b> Sudbury  | <b>State</b> MA | <b>Country</b> US  | <b>Citizenship</b> US |
| <b>Mailing Address</b> 99 Maynard Farm Road   |                 |  |                       |
| <b>City</b> Sudbury   | <b>State</b> MA | <b>Zip</b> 01776   | <b>Country</b> US     |
| <b>Name of Additional Joint Inventor, if any:</b>   |                 | <input type="checkbox"/> A petition has been filed for this unsigned inventor. |                       |
| <b>Given Name</b><br>(first and middle [if any])  |                 | <b>Family Name</b><br>Or Surname   |                       |
| <b>Inventor's Signature</b>   |                 | <b>Date</b>  |                       |
| <b>Residence: City</b>  | <b>State</b>    | <b>Country</b>   | <b>Citizenship</b>    |
| <b>Mailing Address</b>  |                 |  |                       |
| <b>City</b>   | <b>State</b>    | <b>Zip</b>   | <b>Country</b>        |